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APPLICANTS

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**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******

IF REQUIRED

** 08/14/2001		<input type="checkbox"/> yes <input type="checkbox"/> no				
Foreign Priority claimed		<input type="checkbox"/> yes <input type="checkbox"/> no				
35 USC 119 (a-d) conditions met		<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged		Examiner's Signature _____ Initials _____	STATE OR COUNTRY OR	SHEETS DRAWING	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2

ADDRESS

Patent Documentation Center

Xerox Corporation

Xerox Square 20th Floor

100 Clinton Ave. S.

Rochester , NY 14644

TITLE

Method for enhanced black in draft mode

FILING FEE RECEIVED 840	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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